



2024

OPIOID AWARENESS & PREVENTION

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Letter from the Health Officer

When this guide was first published in 2019, Racine County, along with many other communities in Wisconsin and the United States, experienced dramatic increases opioid use and drug-related overdoses. Unfortunately, the trend has continued, and we revised this guide to ensure it contained up to date information, resources and tools for community members to assist in stopping this cruel epidemic. Currently, there are many organizations in the County working on harm reduction programs and increasing awareness and access to treatment for those struggling with substance use disorder. In addition, Racine County Public Health Division continues to lead a multidisciplinary team to review overdose deaths and identify opportunities for prevention. While progress is being made, there is still work to be done.

What can you as a member of the community do? First, remember that addiction is a disease affecting the brain and does not discriminate. Anyone can become addicted - friends, neighbors, coworkers - and it is important to remember to treat them with the same love and support you would give anyone else battling a disease. It is imperative that we change the narrative around substance abuse, reduce the stigma around addiction, and support the individuals who need treatment. We hope that you will use this guide to help yourself, your loved ones, and your community and join us in the effort to reverse the opioid epidemic.

JEFFREY LANGLIEB

HEALTH OFFICER

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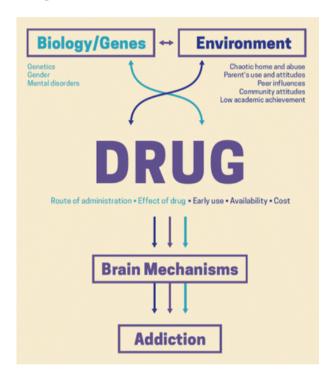
OVERVIEW

WHAT IS ADDICTION?
SIGNS OF ADDICTION AND SUBSTANCE ABUSE
WHAT ARE OPIOIDS?
OVERDOSE STATISTICS
LOCAL, STATE, AND NATIONAL DATA
MYTH VS. FACT
WHAT CAN WE DO?



WHAT CAUSES ADDICTION?

The likelihood of developing an addiction differs from person to person, and no single factor determines whether a person will become addicted to drugs. In general, the more **risk factors** a person has, the greater the chance that taking drugs will lead to drug use and addiction. **Protective factors** reduce a person's risk.



Risk Factors

- Aggressive behavior in childhood
- Lack of parental supervision
- Low peer refusal skills
- Drug experimentation
- Availability of drugs at school
- Community Poverty

Protective Factors

- Self-efficacy (belief in self-control)
- Parental monitoring and support
- Positive relationships
- Good grades
- School anti-drug policies
- Neighborhood resources

What is the difference between "tolerance," "dependence," and "addiction"?

Opioid tolerance: a reduced response to medication, requiring more opioids to experience the same effect.

Opioid dependence: when the body adjusts its normal functioning around regular opioid use. Unpleasant physical symptoms occur when medication is stopped.

Opioid addiction (Opioid use disorder (OUD)):

- when attempts to cut down or control use are unsuccessful
- when use results in social problems and a failure to fulfill obligations at work, school, and home. often comes after the person has developed opioid tolerance and dependence

5

- physically challenging to stop opioid use
- · increased risk of withdrawal

Source: NIDA¹

SIGNS OF SUBSTANCE USE DISORDER



Behavioral Changes:

- Drop in attendance or performance at work or school
- Frequently getting into trouble
- Engaging in secretive or suspicious behaviors
- Changes in appetite or sleep
- Unexplained change in personality or attitude
- Sudden mood swings, irritability, or angry outbursts
- Periods of unusual hyperactivity, agitation, or giddiness
- Lack of motivation
- · Appearing fearful, anxious, or paranoid

Physical Changes:

- Bloodshot eyes
- · Abnormally sized pupils
- Sudden weight loss or weight gain
- Deterioration of physical appearance
- Unusual smells on breath, body, or clothing
- Tremors, slurred speech, or impaired coordination

Social Changes:

- Sudden change in friends and hobbies
- Legal problems related to substance use
- Unexplained need for money or financial problems
- Using substances even though it causes problems in relationships

POLYSUBSTANCE USE

What is polysubstance use?

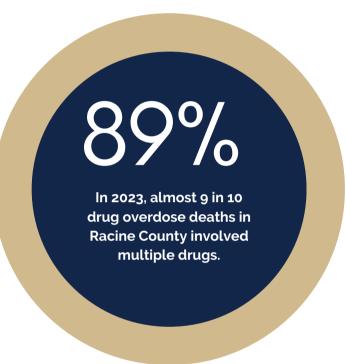
The use of more than one drug, also known as polysubstance use, is common. This includes when two or more are taken together or within a short time period, either intentionally or unintentionally.

Drinking alcohol while using other drugs

Drinking alcohol while using other drugs isn't safe. Alcohol is a depressant with similar effects to other downers. Mixing alcohol with other drugs can increase your risk of overdose and serious damage to the brain, heart, and other organs.

What about prescription drugs?

The dangers of polysubstance use also apply to prescription drugs. Always let your doctor know what drugs you are taking to prevent any adverse reactions with newly prescribed medications. Never take pills that did not come from a pharmacy and weren't prescribed to you.



Whether intentional or not, mixing drugs is never safe because the effects from combining drugs are often stronger, more unpredictable, and even deadly.



Mixing Stimulants

Examples of stimulants: ecstasy (MDMA), cocaine, methamphetamines, amphetamines (speed)

Stimulants (also known as uppers) can increase your heart rate and blood pressure to dangerous levels and increase your risk of several serious health problems.

Combining stimulants may even directly or indirectly increase your risk of:

- Brain injury
- Liver damage
- Heart attack
- Stroke

Signs of overdoset hat may occur when mixing stimulants:

- Fast/troubled breathing
- Increased body temperature
- Nausea or vomiting
- Chest pain
- · Seizures or tremors



Mixing depressants

Examples of depressants: opioids (heroin, morphine, oxycodone, hydrocodone, fentanyl), benzodiazepines

Depressants (also known as downers) can slow down your breathing and increase your risk of several adverse health outcomes.

Combining depressants can also directly or indirectly increase your risk of:

- Damage to the brain and other organs
- Overdose
- Death

Signs of use/overdose5,6 when mixing depressants:

- · Slow breathing
- Weak pulse
- Altered mental status or confusion
- · Passing out
- polysubstance use uppers downers
- Mixing stimulants and depressants



<u>Mixing stimulants and depressants</u> doesn't balance or cancel them out. In fact, the results of combining drugs are unpredictable, often modifying or even masking the effects of one or both drugs. This may trick you into thinking that the drugs are not affecting you, making it easier to overdose.



WHAT ARE OPIOIDS?

Opioids are a class of drugs used to reduce pain.

Prescription opioids can be prescribed by doctors to treat moderate to severe pain but can also have serious risks and side effects.

Heroin is an illegal opioid. 36 people die every day from an overdose death involving heroin in the United States.

Fentanyl is a synthetic opioid pain reliever. It is many times more powerful than other opioids and is approved for treating severe pain, typically advanced cancer pain. Illegally made and distributed fentanyl has been on the rise in several states.





... of all opioid overdose deaths in 2020 involved synthetic opioids (excluding methadone).

www.cdc.gov

HEROIN

Over 19% of all opioid overdose deaths in 2020 involved heroin. Not only are people using heroin, but they are also using multiple other substances, including cocaine and prescription opioids.

How is heroin harmful?

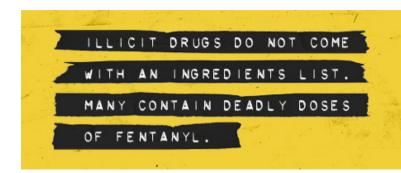
- Heroin is an illegal, highly addictive opioid drug.
- A heroin overdose can cause slow and shallow breathing, coma, and death.
- People often use heroin along with other drugs or alcohol. This practice is especially dangerous because it increases the risk of overdose (see Polysubstance Abuse on page ##).
- Heroin is typically injected but is also smoked and snorted. When people inject heroin, they are at risk of serious, long-term viral infections such as HIV, Hepatitis C, and Hepatitis B, as well as bacterial infections of the skin, bloodstream, and heart.
- Over 19% of all opioid overdose deaths in 2020 involved heroin.

Heroin-involved overdose deaths in 2020 were over 4x the number in 2010.

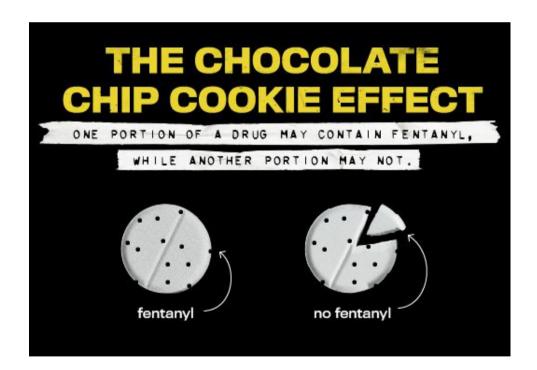


FENTANYL

Fentanyl and other synthetic opioids are the most common drugs involved in overdose deaths. Even in small doses, it can be deadly. Over 150 people die every day from overdoses related to synthetic opioids like fentanyl...



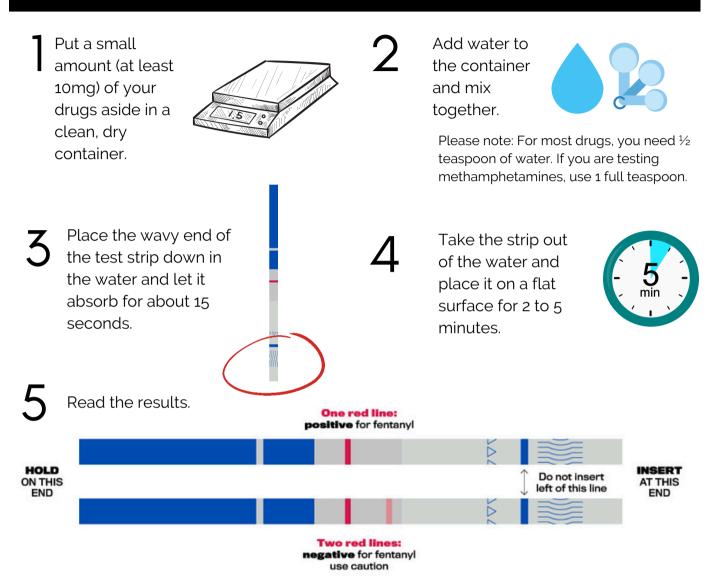
Drugs may contain deadly levels of fentanyl, and you wouldn't be able to see it, taste it, or smell it. It is nearly impossible to tell if drugs have been laced with fentanyl unless you test your drugs with fentanyl test strips.



Powdered fentanyl looks just like many other drugs. It is commonly mixed with drugs like heroin, cocaine, and methamphetamine and made into pills that are made to resemble other prescription opioids. Fentanyl-laced drugs are extremely dangerous, and many people may be unaware that their drugs are laced with fentanyl.

Fentanyl, even in small doses, can be deadly. It is impossible to see, taste, or smell fentanyl. The only way to determine if drugs have been laced with fentanyl is by using fentanyl test strips.

FENTANYL TEST STRIPS



Positive results: A **single pink line** on the left-hand side indicates that fentanyl or a fentanyl analog has been detected in your drugs. If you receive a positive result, it is much safer to discard the batch. Using it could kill you. Illicitly manufactured fentanyl is extremely potent and can be deadly.

Negative results: Two pink lines indicate that fentanyl or a fentanyl analog has not been detected in your drugs. Remember that no test is 100% accurate and your drugs may still contain fentanyl or fentanyl analogs even if you receive a negative result. You should still take caution as FTS might not detect more potent fentanyl-like drugs, like carfentanil, and fentanyl might not be everywhere in your drugs and your test might miss it (see the chocolate chip cookie effect on page X).

Invalid results: A **single pink line on the right-hand side or no lines at all**, indicates an invalid test. If you get an invalid result, test your drugs again using a new strip.



OVERDOSE STATISTICS

The rates of overdose deaths have sharply increased over the past 20 years. The following data has been sourced from the Centers for Disease Control and Prevention (CDC) and the Wisconsin Department of Health Services.





Wisconsin Update



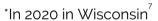
of deaths related to synthetic opioids*

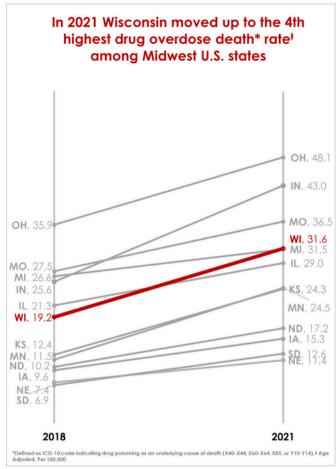


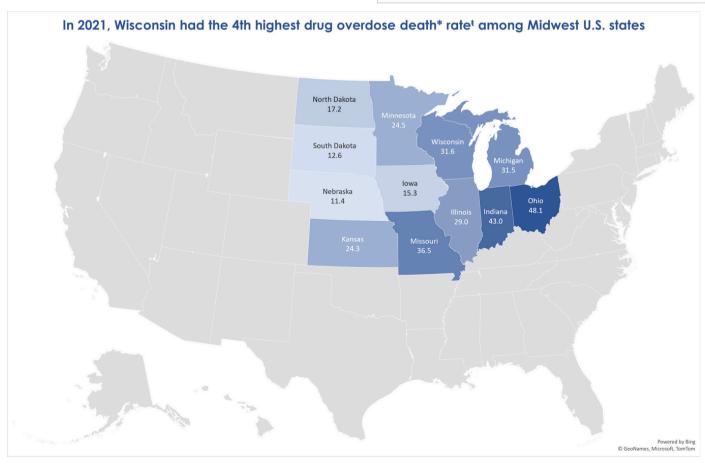
of deaths related to heroin overdose*



of deaths related to prescription opioids*





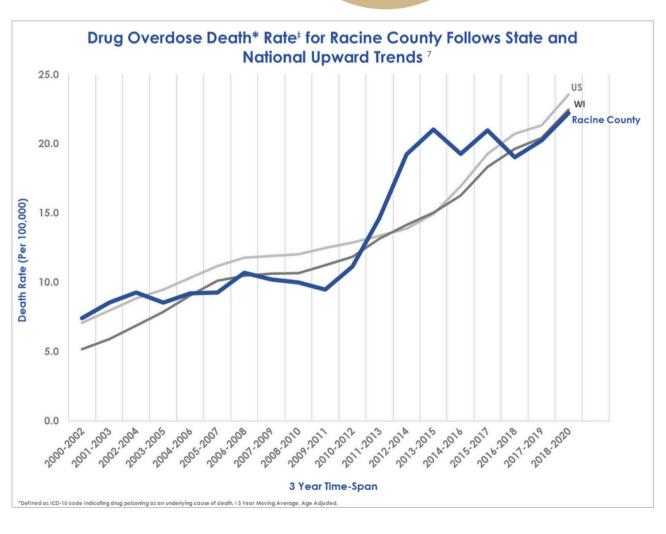


Compared to the state and nation,

Racine County has seen a more dramatic increase in the drug overdose mortality rate over the last several years.

200%

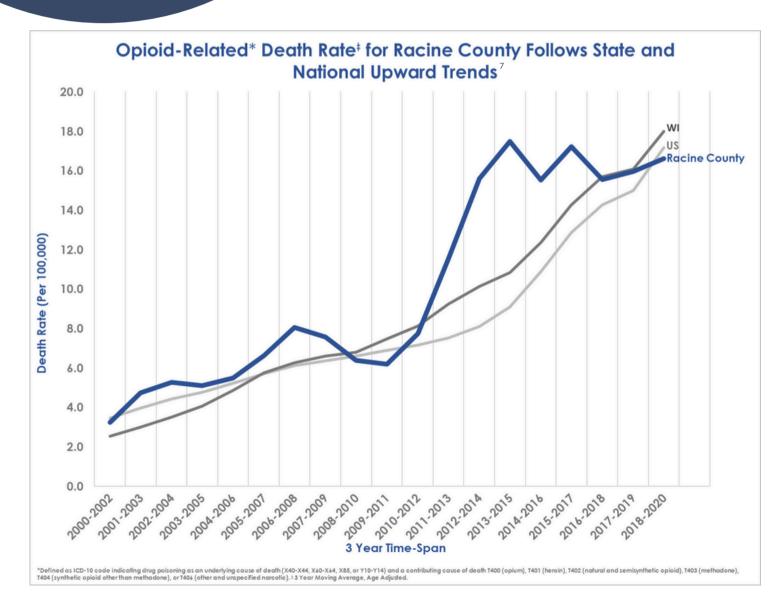
increase in the Racine County drug overdose death rate between 2000 and 2020⁷



414%

The death rate for opioid-related deaths in Racine County has increased by 414% between 2000 and 2020.





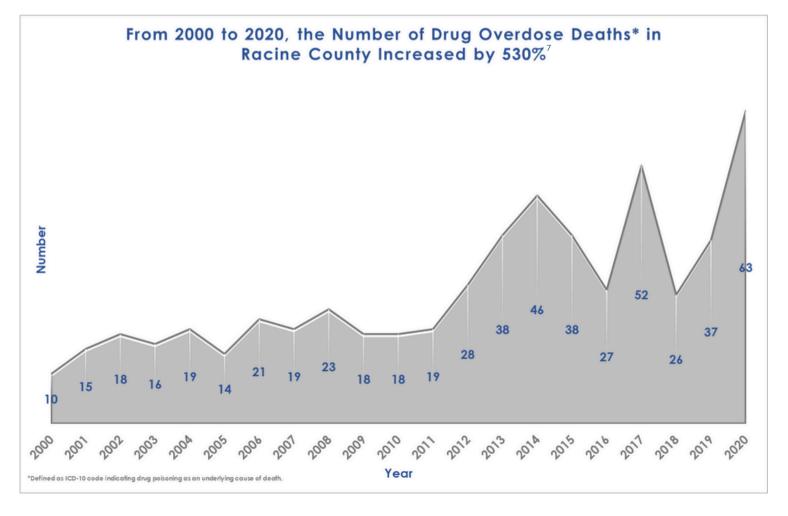


Overdose deaths have increased

dramatically in Racine
County over the past 20
years due in large part to
the opioid epidemic and the
impact of COVID-19.

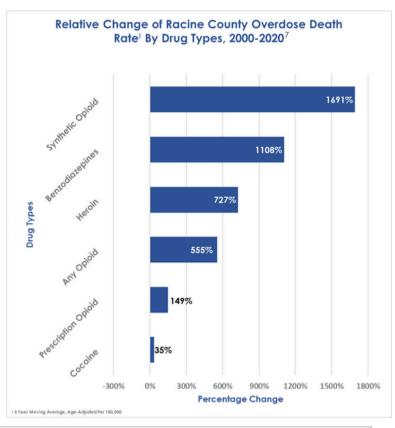
73%

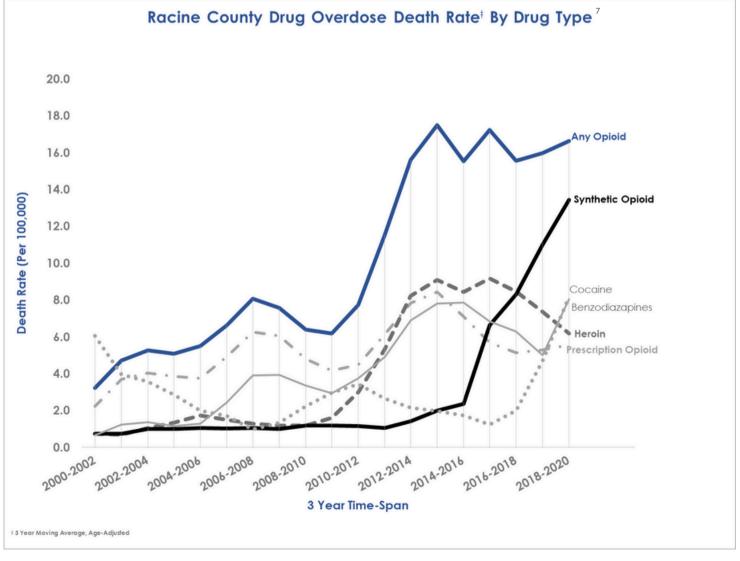
of all overdose deaths in Racine County from 2000 to 2020 were associated with opioid use ⁷

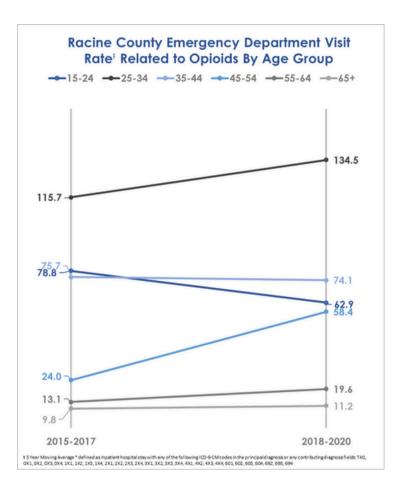


Synthetic opioids

is linked to the sharpest increase in drug overdose deaths. One contributing fact to this increase is the introduction of fentanyl into the drug supply in Racine County.

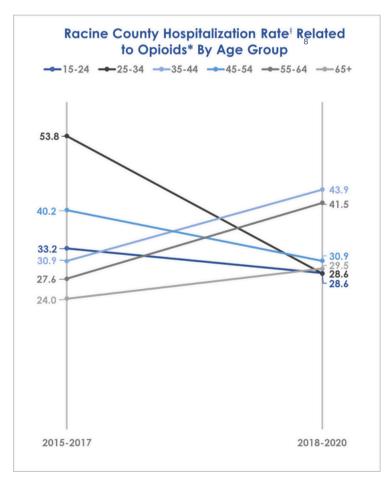


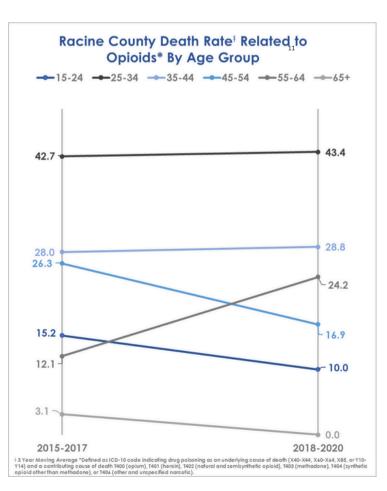




25-34 year olds

account for the highest rates of overdose-related emergency department visits and deaths in Racine County. Over recent years, the hospitalization rate for 25-34 year olds has decreased.





MYTH VS. FACT

MYTH

Prescription medications are not addictive.

FACT

Prescription medications can be addictive when they are not used responsibly. Both the physician and the patient must consider the risks associated with prescription opioid use.

MYTH

My doctor prescribed it, so it must be safe.

FACT

Even opioids that are prescribed by a licensed physician carry risks. Always use your prescription as directed and ask your doctor about alternative pain management options.

MYTH

Addiction is a choice.

FACT

Addiction is a disease, and while individuals can make a choice to seek treatment, they often require professional support to address the physical and psychological impacts of substance use disorder.

MYTH

I can get in legal trouble for seeking treatment.

SCRIBER

FACT

Addiction in itself is not a crime and seeking treatment will not land you in trouble. It is important to know what resources are available to you and where to find them. See page 35 for more details.

MYTH

NAME

Only illegal drugs lead to overdose.

FACT

Prescription opioids can also lead to overdose when they are not used as directed. Always follow the guidance of your doctor and never take a larger or more frequent dose than what is prescribed to you.

WHAT CAN WE DO?

We must improve the way we treat pain in order to reverse the opioid epidemic, according to the CDC. Preventing substance abuse, addiction, and overdose before they occur is key to this process. In addition, increasing access to harm-reduction programs and a variety of treatment options will work to reduce the rates of addiction and overdose fatalities.

The remainder of this guide provides recommendations using the prevent, reduce, reverse framework from the CDC.



people from starting opioids

Reduce prescription opioid painkiller abuse, improve opioid painkiller prescribing practices, and identify high-risk individuals early.



opioid addiction

Ensure access
to medication
assisted
treatment
(MAT) which
combines the
use of
medications
with counseling
and behavioral
therapies.



Reverse

opioid overdose

Expand the use of Narcan (naloxone), a life-saving drug that can reverse the effects of an opioid overdose when administered in time.

PREVENT

MEDICATION MANAGEMENT
MEDICATION SAFE STORAGE AND DISPOSAL
PARENT RESOURCES
CONVERSATION GUIDES
COMMONLY ASKED QUESTIONS
WHAT TO LOOK FOR IN YOUR TEEN'S ROOM
ACTIVITIES FOR PREVENTION
DATA FOR 15-24 YEAR OLDS
IT TAKES A VILLAGE



MEDICATION MANAGEMENT

PATIENT NAME:

AT AT

ADDRESS:



IF YOU ARE PRESCRIBED OPIOIDS:

- Talk with your doctor to fully understand the risks and benefits of prescription opioids before taking them.
- Make sure you're getting care that is safe, effective, and right for you. Talk with your doctor about setting goals for management of your pain.
- Ask your doctor about non-opioid options for treating pain including other medications and nonpharmacologic options, like exercise.
- Always tell your doctor about any side effects or concerns you may have.¹¹

PRACTICE RESPONSIBLE USE:

- Never take opioids in greater amounts or more often than prescribed.
- Always let your doctor know about any side effects or concerns you may have about using opioids.
- Avoid taking opioids with alcohol and other substances or medications. It is very dangerous to combine opioids with other drugs, especially those that cause drowsiness.
- Do not share or sell your prescription opioids.
- Safely store your medications and dispose of any unused medications responsibly.¹¹

ALTERNATIVES TO OPIOIDS FOR PAIN:

Medication

- Ibuprofen or Naproxen
- Celecoxib or Meloxicam
- Flector & Lidoderm patches
- Voltaren gel
- Tizanidine
- Gabapentin
- Cymbalta

Non-pharmacologic

- Physical Therapy
- Chiropractic
- Epidural Injections
- Facet Injections
- Nerve Blocks
- Botox Injections
- Radiofrequency Ablation (RFA)
- Genicular Nerva Ablation
- Ketamine Infusions
- Platelet Rich Plasma

Surgical

- Spinal Cord Stimulation (SCS)
- Dorsal Root Ganglion (DRG) Stimulation
- Interspinous Spacers for Spinal Stenosis
- Microdiscectomy
- Kyphoplasty
- Intrathecal Pump
- •

MEDICATION SAFE STORAGE



If you are prescribed opioids, there are ways to protect yourself and your loved ones. Practice these safe storage tips to avoid medication falling into the wrong hands.

Use a lock box to secure prescriptions.

A lock box is a safe alternative to a medicine cabinet and is used to prevent others from purposefully taking medications as well as preventing children from accidentally ingesting them.

Keep track of your medications.

Know the medications you have on hand, including the number of pills in each bottle. Use your prescriptions as directed for both your safety and to avoid any confusion about missing medications.

Dispose of unused medications.

Expired or unused medications should be properly disposed of as soon as possible. Leaving unused medications in the home creates more opportunity for misuse.

Talk to your family about your medications.

Explain to children and teens that you work closely with your doctor to ensure that your medications are safe and effective. Discuss the risks of taking medications that are not prescribed for you and that you are closely monitoring your medications at home.

MEDICATION DISPOSAL

DROP BOX LOCATIONS:



Caledonia Police Dept

6900 Nicholson Rd Caledonia, WI 53108



Town of Burlington Police Dept

32288 Bushnell Rd Burlington, WI 53105



City of Burlington Police Dept

224 E Jefferson St Burlington, WI 53105



Union Grove Village Hall

925 15th Avenue Union Grove, WI53182



City of Racine Police Dept

730 Center St Racine, WI 53403



Town of Waterford Police Dept

415 N Milwaukee Street Waterford, WI 53185



Mt Pleasant Police Dept

8811 Campus Drive Mt Pleasant, WI 53406



Lakeview Pharmacy

516 Monument Square Racine, WI 53403



Racine Sheriff Patrol Station

14116 Washington Ave Sturtevant, WI 53177



Walgreens Pharmacy

4810 Washington Ave Racine, WI 53406



Sturtevant Police Dept

2801 89th Street Sturtevant, WI 53177

CANNOT MAKE IT TO A DROP BOX?

Please call your pharmacy, physician, or local police department to inquire about purchasing a mail back package to send in unused or expired medications.

Tele's Story

Tele began misusing prescription opioids with friends in high school, seeking a "numbing effect" from the drugs. He quickly became addicted. Throughout high school, Tele was popular, played sports, and got good grades, but he experienced anxiety and depression that were heightened by his inability to share his sexual identity. Tele began using heroin during his senior year. After a car crash, he was arrested and jailed for driving while impaired and for possession of illegal substances.

Tele sought treatment for his substance use disorder and has been in recovery for four years. He credits his parents and friends for helping him through the difficult treatment and recovery process. In recovery, he enjoys feeling happy and clear-headed. Tele hopes that by sharing his story, he can reduce the stigma associated with opioid use disorder by showing others that there are many faces and voices associated with addiction and recovery.





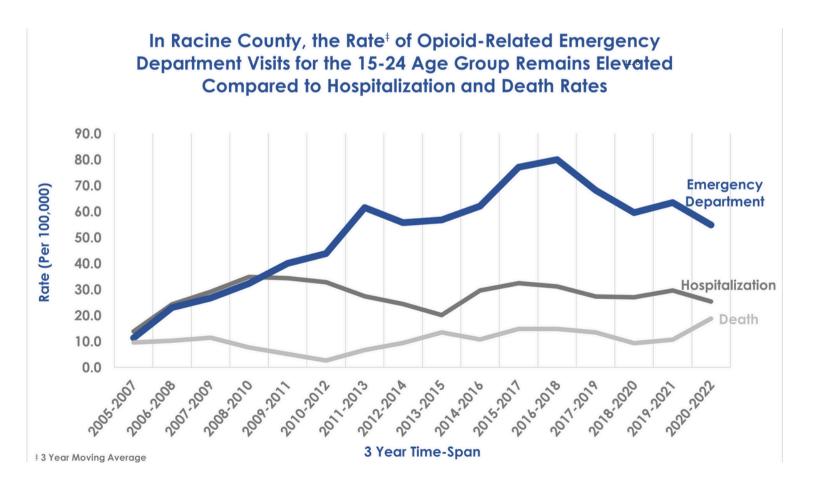


15-24 year olds

consistently have a higher incidence of overdose-related emergency department visits compared to deaths. While they are experiencing overdose, we have the opportunity to reverse the overdose and get them into treatment.

23%

of all opioid-related emergency department are by 15-24 year olds.

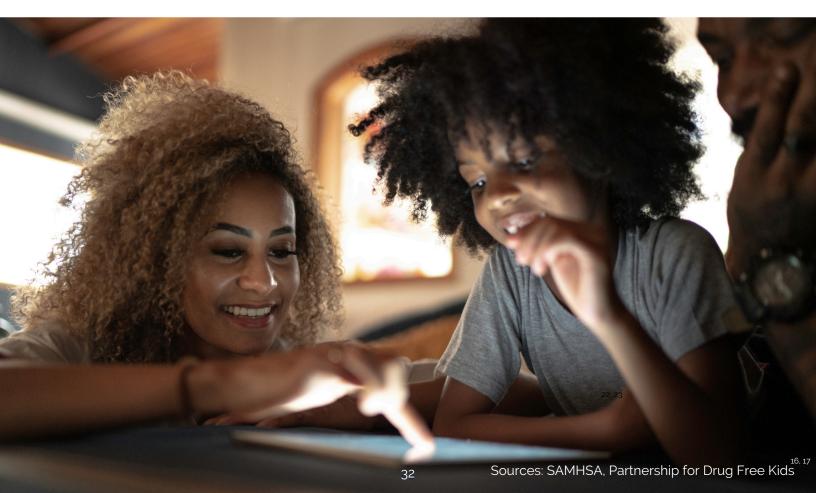


IT IS NEVER TOO EARLY TO SET THE FOUNDATION FOR HEALTHY BEHAVIOR

It is important to begin healthy communication habits with your child at an early age. Listening closely and acknowledging their feelings helps to establish trust and open communication, which makes discussing difficult topics, such as substance abuse, easier.

TIPS TO REMEMBER

- Be a good role model.
- Encourage healthy relationships.
- Be prepared to have several conversations.
- Be clear about your expectations and rules.
- Ask questions to understand your child's point of view.
- Educate yourself and be equipped with facts.
- Be involved in your child's life and share their interests.
- Recognize good behavior consistently and immediately.



IT TAKES A VILLAGE

Parents often struggle with the balance between providing love and support for their child and helping them get treatment. Parents instinctively want to protect their child, which can lead to inadvertently enabling addictive behaviors. It is important to enlist the help of professional and community support. Addiction effects the entire family and it is not a battle that you have to fight alone.





TIPS TO REMEMBER

- Build a community of support for yourself and your child. As much as your child needs help with recovery. you also need support from peers who have been in your shoes.
- Be honest and transparent with your child about your needs ("I am afraid that you will use the money I give you to buy drugs and I cannot deal with the quilt of supporting your addiction").
- Know your resources. Do some research on treatment facilities near you and determine what might be a good fit for your child.
- Remember, you do not have to fix this alone. Your child has to be ready to accept treatment and address the underlying psychological and behavioral issues that support their addiction.
- **Enlist the help of an intervention** specialist. Do not take on an intervention alone. An intervention specialist can help to plan and implement the intervention effectively as someone who is not personally involved in your child's life.

HOW & WHERE TO LOOK FOR SIGNS OF DRUG USE

VISIT DRUGFREE.ORG FOR: Parent resources Risk assessment Trainings

Playbooks

Tips and Advice

Use your nose.

If there has been drinking or smoking, the smell will be on their breath, on clothing and in their hair.

Look them in the eyes.

Eyes may be red and heavy-lidded or have constricted pupils.

Watch their behavior.

How do they act after a night out with friends? Are they loud and obnoxious, unusually clumsy, sullen, withdrawn, unusually tired, queasy and stumbling?

WHAT TO LOOK FOR IN YOUR TEEN'S ROOM

Kids come up with creative places to conceal alcohol, drugs, and drug paraphernalia. Some possible hiding spots include:

- Dresser drawers beneath or between clothes
- Desk drawers
- CD/DVD cases
- Small boxes jewelry, pencil, etc.
- Backpacks/duffel bags
- Under a bed
- In a plant, buried in the dirt
- In between books on a bookshelf
- Inside books with pages cut out
- Makeup cases inside fake lipstick tubes or compacts
- Under a loose plank in floor boards
- Inside over-the-counter medicine containers (Tylenol, Advil, etc.)
- Inside empty candy bags such as M&Ms or Skittles
- Inside empty soda cans or cans with false bottoms





CONVERSATION GUIDES



TALKING TO YOUR TEEN

BE CLEAR ABOUT YOUR EXPECTATIONS

While your teen is probably trying to test their boundaries, it is important to establish rules and be up front and clear about your expectations of them.

Leaving your teen guessing about what is expected of them can create ambiguity about what is acceptable behavior and lead to unhealthy behaviors. It can be helpful to explain the "why" behind your rules and include teens in conversations to develop house rules so that they feel heard and respected.

EXPECT OUESTIONS

Be prepared to answer questions about drug abuse, addiction, and various "what if" scenarios. If you do not know the answer to their question, offer to find the answer together and use the opportunity to teach your teen how to find accurate information from reputable sources.

PROVIDE STRUCTURE

• **E** A

Your teen is likely seeking more independence and trying to push boundaries. While it is important to let them learn how to be independent adults, it is equally important to provide a stable, structured home environment.

BE CONSISTENT

Ensure that all of your teen's caregivers are consistently delivering a message to promote healthy behaviors and prevent substance abuse. Inconsistencies in this message could confuse your teen or encourage risky behavior.

HAVE AN ESCAPE PLAN

Take time to develop a plan for them to remove themselves from risky situations. This could be a code word they can text you that prompts you to ask them to come home or go pick them up.

GET PERSONAL

Your teen may ask questions about your past experiences with alcohol and drugs. It is up to you to examine your relationship with your teen and determine what is appropriate to share. Sometimes being open about your experiences and the consequences or lessons you learned can be a powerful learning tool.

School Age Strategies



Answer the "Whv"

"Why?" is a common question for school age children as they are curious to learn more about the world around them. Try not to dismiss them or answer with "because I said so." Rather, encourage them to think critically and find the answer together. This helps them build problem solving skills they can apply in other situations as well.

Foster Healthy Friendships

Encouraging healthy friendships is important both for development of social skills and for creating a safe and healthy group to rely on when they are away from home. Get to know your child's friends and discuss with them what qualities they value in good friends.

Clarity and Consistency are Key

When setting rules and expectations for your child, it is important to be clear and consistent with your message. Changing the rules without notice creates confusion and instability. Also, be sure that all of your child's caregivers are consistent with the rules and messages being provided to your child.



Create a Code Word

Come up with a plan for your child to notify you if they find themselves faced with the opportunity to try drugs or alcohol. Finding a code word that they can send via text or use in a phone call is an easy way for them to get out of a difficult situation. If they have to use the code word, follow up with a conversation and be sure to praise them for making a good decision under pressure.

Practice for Peer Pressure

Another way to help your child navigate difficult situations is to practice what they will say when faced with peer pressure. Come up with a few phrases together that they feel comfortable using and practice role playing so they feel confident putting them to use.



Connect with Other Parents

Get to know the parents of your child's friends and have conversations about what they are doing to prevent their child from experimenting with drugs and alcohol. These relationships could help you learn tips for prevention or simply help you to identify safe places to allow your child to play.



GREAT FOUNDATIONS

INCLUDE YOUR CHILD IN CONVERSATIONS

Take time to listen to their ideas and ask for input on simple things such as what to have for dinner or what activities to do on the weekend

MAKE TIME FOR **ACTIVITIES**

Spend at least 15 minutes a day engaging in a fun activity that your child loves. This shows them that you care about their interests and helps to build trust. Use this time to ask questions and actively listen to their ideas.

TALK OPENLY **ABOUT FEELINGS**

If your child is feeling frustrated, angry, or sad, ask them how they are feeling and guide them to cope with emotions in a healthy way (i.e. if they feel sad talk about why and offer to do a comforting activity or simply a hug). Learning to manage emotions at a young age can help your child avoid turning to drugs or alcohol to cope with challenging feelings later on in life.

FOSTER HEALTHY FRIENDSHIPS

Teaching your child how to make friends and navigate relationships with their peers helps them develop socially and prepares them to handle conflict when they are older. These skills will help them better handle situations with peer pressure.

PROMOTE HEALTHY BEHAVIORS

Teach your child to care for and respect his or her body. Eating healthy foods, staying active, and getting enough rest are all great ways to introduce the promotion of physical and mental health to your child.

CREATE ROUTINES

Children crave structure and thrive when they know what to expect. Having consistent routines in the morning and before bed helps your child to engage in positive behaviors and establishes a foundation for long term success.





COMMONLY ASKED QUESTIONS

HOW TO ANSWER YOUR CHILD'S QUESTIONS ABOUT OPIOIDS

THINGS TO REMEMBER:

- ✓ Be prepared with facts and resources
- ✓ Ask open-ended questions
- Listen, don't lecture
- ✓ Make your expectations clear

"EVERYONE DOES IT."

"It may seem like everyone does it because of what you see online or in school, but the reality is that most teens don't use drugs. It might be popular, but that doesn't mean it's safe."

"YOU TAKE MEDICATION, WHY CAN'T I?"

"You're right. I work closely with my doctor to make sure it is the best option for my pain and that I am taking them safely and responsibly."

"I DON'T KNOW WHAT TO SAY WHEN MY FRIENDS ASK ME TO **USE DRUGS."**

"Let's figure out a response you're comfortable with together. It's best to be direct and assertive about your choices."

"ISN'T IT SAFE IF IT IS A PRESCRIPTION?"

"Opioids are only safe if taken as prescribed by a doctor. If it wasn't prescribed for you, don't take it."

"IT'S MEDICINE, SO WHY WORRY?"

"Opioids are prescribed for those who need them for severe pain. Any medication (even over the counter) is dangerous if misused."

ACTIVITIES FOR PREVENTION

BE CREATIVE

Art and music are great ways to bond with your child while teaching them healthy coping skills.

HOST A PLAYDATE

Being the host for play dates supports your child in building healthy friendships while reinforcing that home is a safe space for them to build relationships.

BE ACTIVE TOGETHER

Build healthy habits as a family and use these activities as an opportunity to talk about other health choices, such as how to avoid drugs and peer pressure.

GET INVOLVED IN YOUR COMMUNITY

Encouraging your child to participate in community programs and groups shows them that they have support both at home and in their neighborhood.

KID'S CHOICE

Allowing your child to choose an activity shows them that you care about their interests and opinions.

Source: SAMHSA¹⁶

David's Story

David founded a multimillion-dollar brokerage firm, managed 75 employees, and was happily married. At age 39, David was prescribed opioids to manage pain from several knee surgeries. Although David had a history of excessive alcohol use and cocaine use and had even completed treatment for substance use, he wasn't aware of the addictive properties of prescription opioids. In a matter of weeks, David was addicted and found himself taking 120 milligrams a day, which was far more than he was prescribed. When David could no longer get a prescription for opioids, he turned to heroin, and from there his life spiraled out of control. He bankrupted his brokerage firm, lost his wife to divorce, and was sentenced to 5 years in federal prison.

David found recovery and dedicated his career to working as an interventionist and certified recovery coach. He advocated for Minnesota's first opioid stewardship bill, which provides funding for local prevention, education, and treatment efforts. David wanted to help others recognize that recovery is a process, not a quick fix, noting that, "hope is possible – you don't need to keep going by yourself." David died in February 2023 at the age of 63.



REDUCE

WHAT ARE YOUR TREATMENT OPTIONS?

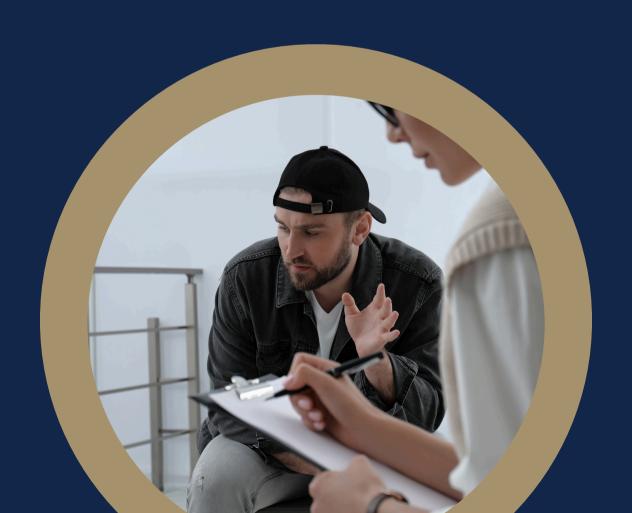
WHERE TO FIND HELP

OPIOIDS IN THE WORKPLACE

PREVENTION AT WORK

RECOVERY FRIENDLY WORKPLACES

STIGMA



WHAT ARE YOUR TREATMENT OPTIONS?

There are many pathways to recovery and it may take a combination of therapies to reach sobriety. The first step is getting in touch with a recovery specialist who can connect you to local treatment centers and resources that are the best fit for you.

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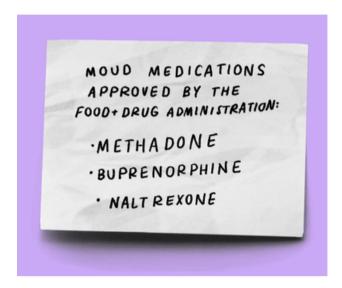
Opioid use disorder may require medication as the first course of treatment. **Medications for opioid use disorder (MOUD)** can help with cravings and withdrawal symptoms. MOUD is effective in helping people overcome addiction, stay in recovery longer, and prevent reoccurrence of use.

Taking these medications during treatment doesn't mean taking the easy way out; it means finding something that works best for that individual.

Twelve-step facilitation therapy is an individual active engagement strategy designed to encourage people to accept drug addiction as a chronic, progressive disease and prepare them to begin a 12-step mutual support program.

Outpatient counseling can help people understand addiction, their triggers, and their reasons for using drugs. This form of treatment can be done at a doctor's office or via telehealth appointment.

Inpatient rehabilitation at a full-time facility provides a supportive environment to help people recover without distractions or temptations.





Source: CDC ¹⁸

WHERE TO FIND HELP

Wisconsin Addiction Recovery Helpline

This free and confidential service helps you find local treatment and recovery services. You can call, text, or chat online with a resource specialist 24/7.

1-833-944-4673 or 211 www.addictionhelpwi.org 19

SAMHSA

Substance Abuse and Mental Health Services Administration (SAMHSA) offers treatment directories via their online platform and phone hotline.

1-800-662-HELP (4357) TTY: 1-800-487-4889 www.samhsa.gov/find-help/national-helpline²⁰

WISHOPE

Find local treatment resources, naloxone pharmacies, and drug drop boxes. Call their peer to peer recovery resource and support line to get connected with services in your area.

1-844-WIS-HOPE https://www.wishope.org/²¹

Veteran's Crisis Line

The Veteran's Crisis Line offers veterans and their families assistance through their hotline, online chat, or text.

1-800-273-TALK (8255) TTY: 1-800-799-4889 www.veteranscrisisline.net ²²

Racine County Human Services

Behavioral Health Services provides a comprehensive array of mental health and substance abuse services including outpatient evaluations, psychotherapy, and counseling. BHS is available Monday - Friday, 8am-5pm.

262-638-6744

Racine County Opioid Resource Line

1-262-638-6375²³

Racine County Crisis Services

Provides emergency mental health services 24/7 to assist in developing response plans to provide information and resources to meet an individual's service need.

262-638-6741²³





Jeni's Story

Raised in a small Tlingit village in Hoonah, Alaska, Jeni has been in recovery for more than three years. She began misusing prescription opioids and using alcohol as a teenager. At age 21, she realized that she was using alcohol and opioids to mask the pain of the sexual assaults she survived as a young teen. Following a car crash, Jeni was prescribed opioids to treat back and neck pain from her injuries. Soon after, she began taking more than prescribed, which led to addiction. Then Jeni transitioned from misusing opioids to using heroin and methamphetamines.

She was arrested multiple times and she knew that something needed to change. She says that she backed away from her culture and family and hit "rock bottom" the night before her last arrest. Prior to her incarceration, Jeni attended a 40-day residential treatment program in Sitka and attended Narcotics Anonymous and Alcoholics Anonymous. Today, Jeni attributes much of her success to reconnecting with her traditional culture and family. She participates in peer recovery programs and is training to become a peer counselor to work with other women who have been incarcerated.²¹





OPIOIDS IN THE WORKPLACE

According to the National Safety Council, an average of 15.6% of employees live with a substance use disorder with the highest rates of prescription pain medication disorders coming from people in the services sector. Workplaces with high on-the-job injury rates and/or rural locations tend to see increased rates of prescription drug misuse. There are many steps you can take to identify and solve substance abuse problems in the workplace.

The opioid crisis is particularly troubling for businesses due to increased health care costs and decreased productivity as a result of absenteeism. On average, people with opioid use disorders spend five times as many days in the hospital each year and are 4.5 times more likely to visit the emergency room. This translates into higher insurance premiums for employers.²⁴

SIGNS YOUR EMPLOYEES MAY BE STRUGGLING WITH OPIOIDS:

- Changes in attendance such as increased sick days or unplanned absences.
- High turnover rates.
- Loss in productivity.
- Increased tension between team members.

FOR ASSISTANCE WITH WORKPLACE OPIOID POLICIES AND PROGRAMS:

Drug Free Workplace

The Drug Free Workplace hotline assists employers and unions with establishing policies, drug testing, and employee assistance/other programs.

1-800-WORKPLACE (967-5752)
www.samhsa.gov/workplace/resources/drug-free-helpline

PREVENTION AT WORK





EAP Benefits

Offering an employee assistance program can help address many struggles, including substance abuse, that benefit both the employee and the employer.



Create a Wellness Culture

Encourage healthy choices across your workforce by providing opportunities and incentives for participating in healthy behaviors.



Educate and Engage

Inviting employees to attend presentations or engaging with a health coach can help with identification of a substance abuse issue as well as connection to proper care.



Encourage Routine Care

As part of your employee wellness program, encourage regular visits with a primary care provider. That relationship can help employees safely and effectively manage pain concerns.



Offer Outside Resources

Employees may not feel comfortable addressing substance abuse issues through workplace programs. Offer external resources for prevention and treatment to overcome employees' hesitations.

DRUG FREE WORKPLACES

Components of a Drug-Free Workplace

Drug-free workplace programs can help employers create safe, cost-effective, and healthy workplaces. Most successful drug-free workplace programs have five key components:

- A written policy including rationale, organizational goals, compliance with laws, expectations, assistance options, and consequences for violations.
- Employee Education for all employees that reinforces healthy behaviors and addresses the impact of substance use on employment.
- Supervisor Training explaining how to document potential problems in a fair and systematic manner, honor confidentiality, and refer employees to appropriate services. Supervisors may also need training on how to help employees reintegrate into the workplace after receiving services.
- Drug Testing can improve workplace safety and may help with compliance with federal regulations. A drug-testing program can also deter employees from coming to work unfit for duty.
- Employee Assistance Programs may already address alcohol and substance use. The International Employee Assistance Professionals Association offers a <u>certification process</u> for EAP providers and SAMHSA has a <u>toolkit and fact sheets</u> available for download.

The Drug-Free Workplace Toolkit

Source: SAMHSA²⁶





Recovery Business Association

Recovery Business Association is a program under Project WisHope which aims to create recovery responsive business organizations in regards to substance use and co-occurring mental health disorders in support of employers, employees and economies across the nation.

RBA provides training for Human Resource staff, executive teams management and employees, Employment Recovery Coaching services, organizational screenings and assessments, policy and program development and more.

RBA Services:

- Organizational Screenings & Assessments
- Recovery Responsive Policy Development
- Employer and Employee Trainings
- Recovery Employment Coaches

The Centers for Disease Control and Prevention (CDC) estimates the total economic burden of prescription opioid misuse in the US alone is \$78.5 billion a year, including the costs of health care, lost productivity, addiction treatment, and criminal justice involvement. It has been estimated that \$1.5 Billion of this cost is incurred by businesses in the form of impaired productivity and absenteeism. The CDC also estimates that 68.9% of 22.4 million illicit drug users are employed and 76.1% of 2.4 million heavy drinkers are employed.

Economic research has found a strong link between rising opioid prescriptions and declining workforce participation rates, estimating that nearly half of men age 25 to 54 who are not in the workforce take pain medication daily and a higher rate of absenteeism among opioid abusers who work.

The high level of substance misuse across the nation has shown to be a contributing factor in low workforce participation rates amongst young people and women, too. As a result, the addiction epidemic has been deemed to be not only a serious public health issue, but a serious workforce issue – one that employers must address to meet the challenges of finding and retaining quality workers.

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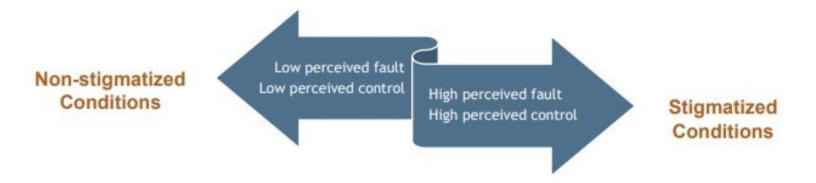
Source: WISHOPE²⁷



STIGMA

: a mark of disgrace or infamy, a stain or reproach, as on one's reputation.²⁸

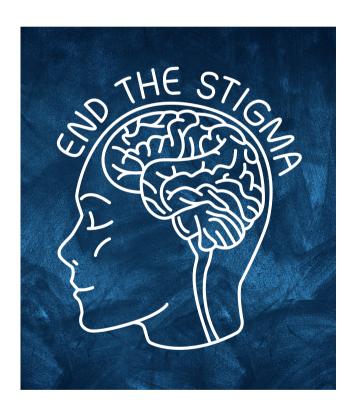
While substance use disorder is a disease, it is commonly perceived that the person struggling with substance use disorder is at fault and has control over their choices. Other conditions, such as cancer, are not stigmatized because the perception is that the person is not at fault for their condition. The reality is that neither condition stems from the fault or control of the victim, and we must begin to change the narrative around addiction in order to better support those in need of treatment.²⁹



How to Reduce the Stigma Around the Opioid Epidemic

- **Use first person language.** Saying that a person has substance use disorder suggests that the person has a problem that can be addressed. Saying that someone is an addict implies that the person is the problem.
- Use proper terminology to avoid stigma. Saying substance use disorder instead of addiction helps to reinforce the fact that the issue is a disease that needs treatment, rather than a personal flaw.
- Use reputable sources for finding substance abuse or treatment information. While there are reputable sources of information online, there is also an abundance of false information or stigmatizing messages that are just as easy to find. Always check the source of your information before accepting and sharing the message.

- Use social media responsibly. Similarly to the issue of finding false information online, there are plenty of false or misleading messages being spread on social media. It is all too easy to hit "share" without checking the source of the message.
 Social media is a great tool for reaching a large audience and garnering support for a cause. Be certain that the information you share is accurate and aim for messages that support those who struggle with substance use disorder before hitting "share."
- Avoid sensational or fear based language. It is easy to get pulled in by headlines about "newer" or "bigger" drug threats, however using terminology that inflates the severity of the opioid epidemic also inadvertently increases stigma by suggesting that individuals that fall victim to substance use disorder are stupid, dangerous, or illogical
- **Perform a "language audit."** Take a look at the terminology that you use on a regular basis and see if there are areas in which you could use less stigmatizing language. It takes time to make these new terms a habit, but making this effort to change the narrative will help to reduce stigma around the issue of substance use disorder.²⁹





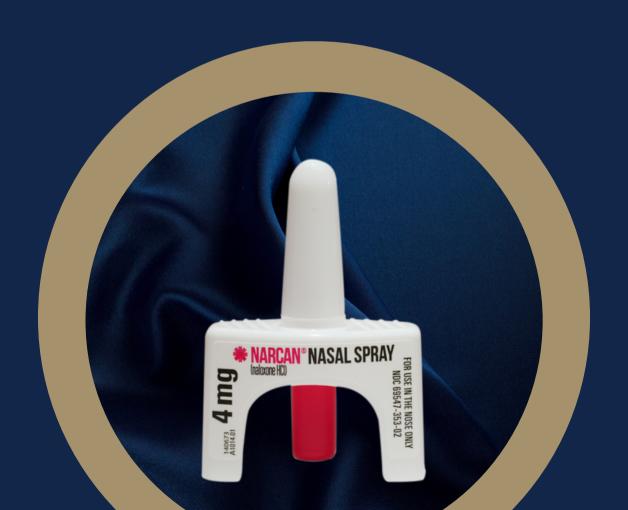
Visit the Recovery
Research Institute's
"Addictionary"

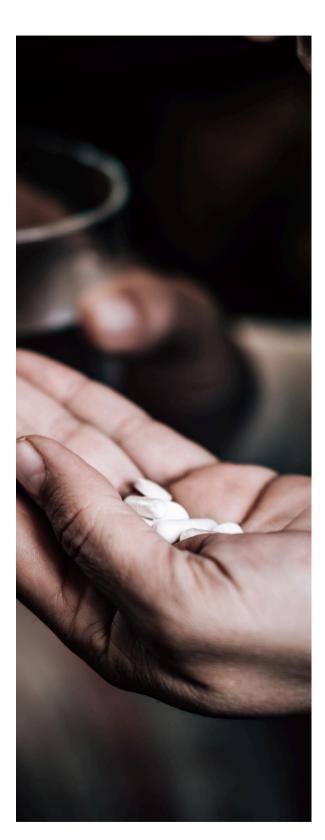
"The power to label is the power to destroy."

— Allen Frances, Saving Normal: An Insider's Revolt Against Out-Of-Control Psychiatric Diagnosis, DSM-5, Big Pharma, and the Medicalization of Ordinary Life $^{^{30}}$

REVERSE

WHAT IS AN OVERDOSE?
SIGNS OF OVERDOSE AND OVERMEDICATION
WHAT TO DO IN CASE OF AN OVERDOSE
DOS AND DON'TS
NARCAN
HOPE AGENDA AND GOOD SAMARITAN LAWS





WHAT IS AN OVERDOSE?

According to the CDC, an opioid overdose happens when too much of the drug interrupts the brain's activity and body's natural drive to breathe. Overdose can happen to anyone using opioids, however there are certain factors that increase risk including:

- Combining opioids with alcohol or other drugs.
- Taking high daily doses or more than prescribed.
- Taking illicit or illegal opioids.
- Medical conditions such as sleep apnea or reduced kidney or liver function.
- Age greater than 65 years old.

SIGNS OF AN OVERDOSE:

- Pale, blue skin
- Slow, shallow breathing
- Constricted pupils
- Loss of consciousness
- · Choking or gurgling
- Limp body

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SIGNS OF OVERMEDICATION:

- Sleepiness or drowsiness
- Confusion, slurred speech
- Slow or shallow breathing
- Very small, pinpoint pupils
- Slow heartbeat or low blood pressure
- Difficulty being awaken from sleep

Source: CDC ³²

WHAT TO DO:

- Call 911 immediately.
- Administer Narcan, if available.
- Keep the person awake and breathing.
- Lie the person on their side.
- Stay with the person until help arrives.

DO'S AND DON'TS WHEN RESPONDING TO AN OVERDOSE

- DO attend to the person's breathing by administering oxygen or performing rescue breathing and/or chest compressions.
- DO administer Narcan and utilize a second dose, if no response to the first dose.
- DO put the person in the "recovery position" on their side, if you must leave the person unattended for any reason.
- DO stay with the person and keep them warm.
- DON'T slap or forcefully stimulate the person; it will only cause further injury. Instead, try rubbing your knuckles on the sternum or light pinching to wake them.
- DON'T put the person into a cold bath or shower. This increases the risk of falling, drowning, or going into shock.
- DON'T inject the person with any substance.
 The only safe and appropriate treatment is Narcan.
- DON'T try to make the person vomit drugs that may have been swallowed. Choking or inhaling vomit into the lungs can cause a fatal injury.

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Source: CDC ³³

HARM

NALOXONEKIT



HARM REDUCTION

There are many ways to stay safe and reduce the risk of infection or overdose. Use as many tips as possible to dramatically reduce harm, but even just using one is beneficial.

CLEAN

- Switch injection sites to avoid infection or injury.
- When using the same location, start further away from the heart and work your way up to allow old wounds time to heal.
- Use a clean area. Clean hands and wipe the injection site with an alcohol pad in one direction.
- Avoid sharing any supplies when possible.

PREP

- Mix drugs with sterile water. You can also use bottled or cold tap water if necessary.
- Use ascorbic acid if necessary to help dissolve the drug. Avoid lemon juice and vinegar.
- Use a clean filter when drawing up solution. A cotton pellet or piece of cotton ball is ideal. Avoid using cigarette filters.
- Find a vein by applying heat to the area and/or using a tourniquet that can be easily released before injecting. Avoid belts or shoestrings.

INJECT

- Aim the syringe toward the heart, bevel side up.
- "Taste" or "Sip" by injecting a small amount and see how strong it is and how it makes you feel before injecting a full dose.
- Dispose of used syringes in a sharps container. If you do not have a sharps container you can use a thick plastic detergent bottle or bleach bottle with a screw on cap.

REMEMBER

- Use fentanyl test strips.
- Keep Narcan with you at all times.
- Never use alone. If using alone is unavoidable:
 - Make yourself accessible leave a door unlocked.
 - Call a friend or the Never Use Alone hotline before using and ask them to check on you in 10 minutes.
- Take advantage of local harm reduction services.
- Get tested regularly for blood borne diseases such as hepatitis and HIV.

HARM REDUCTION KIT

Keep the following supplies on hand to prevent overdose, illness, and injury:

- Narcan/naloxone
- Substance test kits, including fentanyl test strips
- Condoms
- Sharps containers
- Wound care supplies
- Clean syringes and needles
- Alcohol wipes
- Sterile water
- Educational resources and referrals to harm reduction or treatment services





Never Use Alone Inc. is an all volunteer peer-lead peer-run 501(c)(3) nonprofit organization founded in 2019 and incorporated in 2021 to end the opioid overdose public health emergency. NUA is the first nationwide overdose prevention lifeline phone based "spotter" service available 24/7/365 for people to use drugs safely while alone.

NUA volunteer operators receive phone calls from people who use substances while alone in their car, home, public restroom, work and elsewhere. Their peer support operators are trained in substance use safety plans based on method of consumption, how to detect an adverse drug event and to contact local EMS who assist in reversing acute medical conditions.

Today, NUA provides bilingual English and Spanish overdose prevention services at no cost. NUA has received over 16,000 calls, detected and safely reversed 88 adverse drug events. They provide substance use harm reduction outreach, advocacy, education and training to people who use drugs, their caregivers, and community stakeholders.

1-800-484-3731

Spanish: 800-928-5330

NUA now offers Mandy's Line, a service is for people to call when they're struggling with a substance use disorder, and just need someone to talk to that has been there, and understands. All operators have lived experience with SUD, and can relate to what you're going through.

Operators are NOT licensed therapists, or psychologists, and are not affiliated with any treatment center. You will never be pushed into going to treatment. NUA is just available to listen, and offer feedback when requested.

Mandy: 800-943-0540

REVERSE OPIOID OVERDOSE WITH NALOXONE A

SAVING LIVES

Naloxone is a life-saving medication that can reverse an overdose from opioids—including heroin, fentanyl, and prescription opioid medications—when given in time.

Naloxone is available as a nasal spray (Narcan) or an injectable



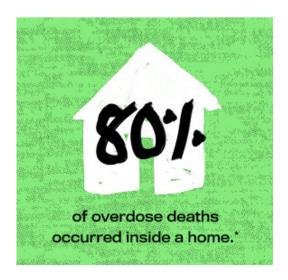
WHERE CAN I GET NALOXONE AT NO COST?

Racine County Behavioral Health Services 1717 Taylor Ave Racine, WI 53403

Racine County Public Health Vending Machine 9531 Rayne Road Surtevant, WI 53177

City of Racine Health Department 730 Washington Ave Racine, WI 53402

Mail Order thru Next Distro and Bad River Harm Reduction: https://nextdistro.org/wisconsin



FAQs

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- Is Narcan legal to carry? Yes.
- Is Narcan harmful if given to someone who is not overdosing? Serious side effects are rare and the drug will have no effect on someone who is not overdosing on opioids.
- Will Narcan reverse overdoses caused by other drugs? No, Narcan works specifically to reverse opioid overdose only.

Source: CDC ³⁷





WHAT IS NEXT Distro?

An online and mail-based **harm reduction service** designed to
reduce opioid overdose death,
prevent injection-related disease
transmission, and improve the lives
of people who use drugs.

NARCAN AVAILABILITY
FENTANYL TEST STRIPS
SYRINGE EXCHANGE
COMMUNITY
ORGANIZATIONS
RECOVERY HOTLINE
GOOD SAMARITAN LAWS

MAIL ORDER SERVICES ARE AVAILABLE FOR THOSE WHO QUALIFY

"We don't heal in isolation, but in community."

— S. Kelley Harrell, Gift of the Dreamtime - Reader's Companion 39



Tessa's Story

Tessa was first introduced to prescription opioids in high school after a sports injury. She was "hooked" by age 18 and used prescription opioids and other drugs to self-medicate her chronic headaches, pain from fibromyalgia, and depression. After receiving a DUI at age 21, Tessa completed substance use treatment but soon relapsed and began buying prescription opioids on the street.

By age 28, Tessa was using heroin. She continued to use prescription opioids and illicit drugs throughout all her pregnancies. Her first and second child both experienced withdrawal symptoms. At the peak of her opioid use disorder, Tessa was arrested for theft and burglary and jailed, and she lost custody of her children.

After entering treatment eight times and continuing to relapse. Tessa finally reached a point where she was ready to make a change. Tessa has been in recovery for three years and runs a treatment center focused on supporting pregnant women with substance use disorders. Tessa feels that sharing her story is furthering her dream to help women with similar backgrounds realize that recovery is possible.²¹

ACKNOWLEDGEMENTS



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

Rx Awareness

















GLOSSARY

Substance Use Disorder (SUD)

a treatable mental disorder that affects a person's brain and behavior, leading to their inability to control their use of substances like legal or illegal drugs, alcohol, or medications

Opioid

a class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin®), hydrocodone (Vicodin®), codeine, morphine, and many others

Synthetic Opioid

substances that are synthesized in a laboratory and that act on the same targets in the brain as natural opioids (e.g., morphine and codeine) to produce analgesic (pain relief) effects

Medication Assisted Treatment (MAT)

the use of medications, in combination with counseling and other therapeutic techniques, to provide a "whole-patient" approach to the treatment of substance use disorders

Fentanyl

a synthetic opioid that is up to 50 times stronger than heroin and 100 times stronger than morphine. It is a major contributor to fatal and nonfatal overdoses in the U.S.

Naloxone/Narcan

a medicine that rapidly reverses an opioid overdose. It is an opioid antagonist. This means that it attaches to opioid receptors and reverses and blocks the effects of other opioids.

Narcan is the name brand nasal spray version of naloxone.

Stigma

a set of negative and unfair beliefs that a society or group of people have about something

Overdose

Overdose (OD) happens when a toxic amount of a drug, or combination of drugs overwhelms the body

Addiction

a chronic, relapsing disorder characterized by compulsive drug seeking and use despite adverse consequences

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9531 Rayne Rd, Ste V Sturtevant, WI 53177

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